



King County

Expand Access to Opiate Overdose Prevention and Medication Assisted Treatment

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State and Federal Request

At the state level, expand access to the life-saving opiate overdose prevention drug naloxone and provide capital funds to launch new community clinics to meet the need for medication-assisted treatment (MAT). Federally, expand MAT by broadening prescription authority for suboxone, and supporting the Comprehensive Addiction and Recovery Act.

Heroin Overdose Deaths Rising Dramatically

In King County in 2014, 254 people died as a result of overdose on heroin or other opiate drugs. Heroin overdoses spiked by 58 percent to 156 individuals, as more people addicted to opiate pain medications switched to dangerous street drugs as a result of improved prescription drug monitoring. Heroin-associated deaths drove an alarming trend in drug-related fatalities, which reached levels not seen since 1997. This represents a widespread public health crisis: 651 Washington residents, and over 24,000 people nationwide, died from opiate overdose in 2013.

State Action: Expand Naloxone Access

Washington has already passed important laws such as the 2010 Good Samaritan drug overdose law, which permitted bystanders to access assistance for someone in crisis without fearing arrest, and 2015's legislation that improved access to naloxone (also known as Narcan), a lifesaving overdose antidote that can keep someone alive while medical help is on the way. Even with limited availability, naloxone is already reversing hundreds of overdoses per year.

Naloxone is available in Washington by prescription or via collaborative drug therapy agreements (CDTAs). Prescriptions may be provided either to people at risk of overdose or to first responders, service providers, family members, or others who are likely to encounter a person overdosing. Washington should promote wider distribution of naloxone, by such approaches as supporting dissemination among first responders and encouraging more pharmacies to enter into CDTAs. This would make this lifesaving medication available more widely. This proposal to expand naloxone availability aligns with the ongoing work of a legislator-led stakeholder workgroup.

Expand Medication-Assisted Treatment (MAT)

Beyond overdose prevention, medication assisted treatment (MAT) is often a necessary treatment tool that helps people to transition safely off of heroin or prescription opiates. Expanded access to the full range of MAT options, including choices like suboxone, and other efforts to invest in MAT and increase overall capacity, should be supported.

State Action – Launch More Community Clinics to Offer MAT: Currently, the capacity of King County's community MAT clinics falls well short of need, and presents barriers to access. Clients who need this therapy must often travel great distances each day to receive their care. People who want treatment are stuck on waiting lists, without the medication that is essential to stop their addiction. State capital funding (\$1.5 million) and siting support, to ensure that more MAT sites become available in underserved areas, would help meet this need.

Federal Action – Expand Access to Suboxone:

Suboxone, a newer MAT option that has benefits over methadone, should be made available more readily than federal law currently permits. Federal agencies should be directed to expand prescription authority beyond physicians to include nurse practitioners and physician assistants. In addition, caps that currently limit prescribers to just 30 or 100 suboxone clients should be removed. With support from case managers, prescribers could safely see more suboxone clients.

Federal Action – Support Comprehensive Addiction and Recovery Act: We also urge support for federal efforts to expand MAT, such as the Comprehensive Addiction and Recovery Act (CARA). CARA includes targeted grant programs as well as public education and investments in recovery support services.

For additional information, please contact:

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